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## BIB DATA SHEET

CONFIRMATION NO. 5399

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/591,929	09/05/2006	362	2885	502902-248PUS

**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/DE05/00369 03/03/2005

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

GERMANY 10 2004 011 368.8 03/05/2004

**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

05/07/2007

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Verified and Acknowledged	<input type="checkbox"/> Met after Allowance <u>JULIE A SHALLENBERGER/</u> Examiner's Signature	Initials	GERMANY	3	26
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**TITLE**

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